

FOR INSTRUCTIONS, SEE BACK OF FORM

IA ETHICS AND

Pin 1-14

DISCLOSURE SUMMARY PAGE

JAN 16 AM 9:49

FORM

DR-2

(Rev. 01/98)

DISCLOSURE
REPORT

For Office Use Only

Comm. #

Indexed

Audited

Computer

1328

56

2-8-08

1-10-08

DATE SIGNED

COMMITTEE NAME (Must be same as on Statement of Organization)

Russell For Representative

IMPORTANT: Indicate type of committee you are reporting for: ☐

- (1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate
(5) County PAC (6) Ballot Issue Franchise Committee (7) County/City Central Committee
(8) Support State of Candidates

Kathryn Russell

462-4006

SIGNATURE OF TREASURER (or person filing this report)

TELEPHONE

Routine Penalties Due For Late Filed Reports Range from \$20 to \$800

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A 1-14-2008 REPORT FOR AN (1) ELECTION (2) NON-ELECTION YEAR.
(report date) Indicate one 2

☐ CHECK IF AMENDMENT TO REPORT DATED _____

☒ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a Notice of Dissolution is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.)

S/B 3483.61 \$ 3383.61

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A)

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B)

Schedule F: Loan Repayments total (Attach Schedule F)

CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)

S/B 0- \$ 3383.61

UNPAID BILLS (From Schedule D - Attach Schedule D)

IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES ☒ NO ☐

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE

B

(Rev. 07/03)

MONETARY
EXPENDITURES



CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Russell for Representative

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
1-12-08	ID# 9123 CK# 0552	Madison County Dem. Central Comm. 2478 Bevington Park Road St. Charles, IA 50240	contribution of remaining funds to close account	\$ 3383.61
2-20-07	ID# CK#	State of Iowa 510 E. 12th St. Des Moines, IA 50319	civil penalty for late filed report	100.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$
TOTAL (if last page of this schedule)				\$ 3483.61

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

* Completed by IECDB auditor as per documents in
file and rec'd from candidate 2-8-08

Page 1 of 1

(for Schedule B)

IA ETHICS AND
CAMPAIGN FINANCE
2008 FEB -8 AM 9:55

Reset Form

FORM

(Rev. 07/03)

DR-3
NOTICE OF
DISSOLUTION

For Office Use Only

Comm. # 1328
Indexed _____
Audited _____
Computer db
Certified Date of Dissolution _____

Notice of Dissolution

Mail to:
IECDB
510 East 12th, Suite 1A
Des Moines, Iowa 50319

Russell For Representative	
Official Name of Committee	
2475	195 Trail
Street	
Winterset	IA 50273
City, State, Zip Code	
515	462-4006
Area Code	Telephone

WHEN TO FILE:

The Notice of Dissolution must be filed within thirty (30) days of completion of all the following:

1. All debts, loans and obligations have been paid or transferred;
2. ~~All campaign funds have been spent;~~
3. All campaign property sold or transferred (candidates only); and
4. A final report disclosing all transactions closing the committee.

For state candidates and state PACs, a final bank statement must be filed with the Notice of Dissolution or as soon as possible if the bank statement is not available at the time the Notice of Dissolution is filed.

[Signature] 2-4-08
Signature of Candidate or Treasurer (if candidate's committee) / Signature of Chair or Treasurer (if PAC)

Date Signed

FOR INSTRUCTIONS, SEE BACK OF FORM

This form is not applicable to statutory political committees.